

# Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One:

☐ Initial

☒ Amendment (Explain)

Address Change

2014 JUL 31 PM 2:37

OFFICE OF  
THE CITY CLERK

CITY OF NEWPORT BEACH

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

Scott Peotter

DAYTIME TELEPHONE NUMBER

( 949 ) 250-7118

FAX NUMBER (optional)

( 949 ) 250-7116

E-MAIL (optional)

scott@peotter.com

STREET ADDRESS

2618 San Miguel Drive, Suite 535

CITY

Newport Beach

STATE

CA

ZIP CODE

92660

OFFICE SOUGHT (POSITION TITLE)

City Council

AGENCY NAME

City of Newport Beach

DISTRICT NUMBER, if applicable.

6

☒ NON-PARTISAN

PARTY:

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ City

☐ County

☐ Multi-County:

(Name of Multi-County Jurisdiction)

2014

(Year of Election)

## 2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

                     Primary/general election  
(Year of Election)

                     Special/runoff election  
(Year of Election)

(Check one box)

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

☐ I did not exceed the expenditure ceiling in the primary or special election held on: \_\_\_\_/\_\_\_\_/\_\_\_\_ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

☐ On \_\_\_\_/\_\_\_\_/\_\_\_\_, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

## 3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

7.31.14  
(month, day, year)

Signature

Digitally signed by Scott Peotter

DN: cn=Scott Peotter, o=ou,  
email=scott@Peotter.com, c=US

Date: 2014.07.30 23:27:36 -07'00' FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

FPPC Form 501 (April/2011)